

E2SHB 1086 - S COMM AMD
By Committee on Ways & Means

ADOPTED 04/07/2021

1 Strike everything after the enacting clause and insert the
2 following:

3 "NEW SECTION. **Sec. 1.** (1) The legislature finds that:

4 (a) According to the federal substance abuse and mental health
5 services administration's 2019 report, one in five adults in the
6 United States will experience some form of mental illness this year
7 and one in thirteen will need substance use disorder treatment;

8 (b) Fewer than half of all individuals needing behavioral health
9 treatment receive those services;

10 (c) An untreated behavioral health need can have long-term
11 negative impacts on an individual's health, well-being, and
12 productivity;

13 (d) The state has made significant investments in the efficacy of
14 the publicly funded behavioral health system and its providers;

15 (e) Behavioral health parity is required by both state and
16 federal law;

17 (f) All patients deserve to be treated and cared for with dignity
18 and respect;

19 (g) Patients often cross local and administrative boundaries when
20 seeking effective behavioral health care;

21 (h) Individuals with behavioral health needs are
22 disproportionately involved with the criminal justice system; and

23 (i) Providing robust community-based services can prevent
24 expensive hospitalizations.

25 (2) The legislature intends to create the state office of the
26 behavioral health consumer advocacy that shall:

27 (a) Advocate for all patients seeking privately and publicly
28 funded behavioral health services;

29 (b) Advocate for all patients receiving inpatient behavioral
30 health services from a behavioral health provider or facility;

31 (c) Assure that patients are afforded all of the rights given to
32 them by state and federal laws;

1 (d) Maintain independence and be free from all conflicts of
2 interest;

3 (e) Provide consistent quality services across the state; and

4 (f) Retain an office within the boundaries of the region served
5 by each behavioral health administrative services organization.

6 NEW SECTION. **Sec. 2.** The definitions in this section apply
7 throughout this chapter unless the context clearly requires
8 otherwise.

9 (1) "Behavioral health provider or facility" means:

10 (a) A behavioral health provider, as defined in RCW 71.24.025, to
11 the extent it provides behavioral health services;

12 (b) A licensed or certified behavioral health agency, as defined
13 in RCW 71.24.025;

14 (c) A long-term care facility, as defined in RCW 43.190.020, in
15 which adults or children with behavioral health conditions reside;

16 (d) A state hospital, as defined in RCW 72.23.010; or

17 (e) A facility or agency that receives funds from the state to
18 provide behavioral health treatment services to adults or children
19 with a behavioral health condition.

20 (2) "Contracting advocacy organization" means the organization
21 selected by the office pursuant to section 3 of this act.

22 (3) "Department" means the department of commerce.

23 (4) "Office" means the state office of behavioral health consumer
24 advocacy.

25 NEW SECTION. **Sec. 3.** (1) By July 1, 2022, the department shall
26 establish the state office of behavioral health consumer advocacy to
27 provide behavioral health consumer advocacy services to patients,
28 residents, and clients of behavioral health providers or facilities.
29 Prior to the establishment and operation of the office, the
30 department shall solicit recommendations from members of the
31 behavioral health community for options to rename the office and the
32 certified behavioral health consumer advocates in a way that shows
33 respect for the community that the office and the advocates serve.
34 Prior to the office beginning operations, the department must rename
35 the office and the certified behavioral health consumer advocates
36 from the options proposed by the community. The department shall
37 contract with a private nonprofit organization to provide behavioral
38 health consumer advocacy services, according to the standards

1 established by the office. The department shall assure all program
2 and staff support necessary to enable the contracting advocacy
3 organization to effectively protect the interests of persons with
4 behavioral health needs in accordance with this chapter. The
5 department shall select the organization through a competitive
6 bidding process and shall assure that the selected organization (a)
7 has demonstrated financial stability and meets the qualifications for
8 the duties identified in this chapter, and (b) does not have any
9 conflicts of interest that would interfere with the duties identified
10 in this chapter. The department shall encourage persons who have
11 lived experience with behavioral health conditions or who are a
12 family member of a person with behavioral health conditions to apply.

13 (2) Following the selection of the organization to carry out the
14 ministerial functions of the office, the department shall not
15 initiate the procurement of a new contract except upon a showing of
16 cause. Prior to ending the contract and conducting a new competitive
17 bidding process, the department shall provide an opportunity for
18 comment by the contracting advocacy organization and to appeal the
19 reselection to the department.

20 (3) The office shall adopt rules to carry out the purposes of
21 this chapter, including:

22 (a) Establishing standards for the contracting advocacy
23 organization to use when certifying behavioral health consumer
24 advocates;

25 (b) Establishing procedures consistent with this act for
26 appropriate access by behavioral health consumer advocates to
27 behavioral health providers or facilities; and

28 (c) Establishing procedures consistent with section 14 of this
29 act to protect the confidentiality of the records of patients,
30 residents, clients, providers, and complainants.

31 NEW SECTION. **Sec. 4.** The state office of behavioral health
32 consumer advocacy shall assure performance of the following
33 activities, as authorized in contract:

34 (1) Selection of a name for the contracting advocacy organization
35 to use for the advocacy program that it operates pursuant to contract
36 with the office. The name must be selected by the statewide advisory
37 council established in this section and must be separate and
38 distinguishable from that of the office;

1 (2) Certification of behavioral health consumer advocates by
2 October 1, 2022, and coordination of the activities of the behavioral
3 health consumer advocates throughout the state according to standards
4 adopted by the office;

5 (3) Provision of training regarding appropriate access by
6 behavioral health consumer advocates to behavioral health providers
7 or facilities according to standards adopted by the office;

8 (4) Establishment of a toll-free telephone number, website, and
9 other appropriate technology to facilitate access to contracting
10 advocacy organization services for patients, residents, and clients
11 of behavioral health providers or facilities;

12 (5) Establishment of a statewide uniform reporting system to
13 collect and analyze data relating to complaints and conditions
14 provided by behavioral health providers or facilities for the purpose
15 of identifying and resolving significant problems, with permission to
16 submit the data to all appropriate state agencies on a regular basis;

17 (6) Establishment of procedures consistent with the standards
18 adopted by the office to protect the confidentiality of the office's
19 records, including the records of patients, residents, clients,
20 providers, and complainants;

21 (7) Establishment of a statewide advisory council, a majority of
22 which must be composed of people with lived experience, that shall
23 include:

24 (a) Individuals with a history of mental illness including one or
25 more members from the black community, the indigenous community, or a
26 community of color;

27 (b) Individuals with a history of substance use disorder
28 including one or more members from the black community, the
29 indigenous community, or a community of color;

30 (c) Family members of individuals with behavioral health needs
31 including one or more members from the black community, the
32 indigenous community, or a community of color;

33 (d) One or more representatives of an organization representing
34 consumers of behavioral health services;

35 (e) Representatives of behavioral health providers and
36 facilities, including representatives of facilities offering
37 inpatient and residential behavioral health services;

38 (f) One or more certified peer specialists;

39 (g) One or more medical clinicians serving individuals with
40 behavioral health needs;

1 (h) One or more nonmedical providers serving individuals with
2 behavioral health needs;

3 (i) One representative from a behavioral health administrative
4 services organization;

5 (j) Other community representatives, as determined by the office;
6 and

7 (k) One representative from a labor union representing workers
8 who work in settings serving individuals with behavioral health
9 conditions;

10 (8) Monitoring the development of and recommend improvements in
11 the implementation of federal, state, and local laws, rules,
12 regulations, and policies with respect to the provision of behavioral
13 health services in the state and advocate for consumers;

14 (9) Development and delivery of educational programs and
15 information statewide to patients, residents, and clients of
16 behavioral health providers or facilities, and their families on
17 topics including, but not limited to, the execution of mental health
18 advance directives, wellness recovery action plans, crisis services
19 and contacts, peer services and supports, family advocacy and rights,
20 and involuntary treatment; and

21 (10) Reporting to the office, the legislature, and all
22 appropriate public agencies regarding the quality of services,
23 complaints, problems for individuals receiving services from
24 behavioral health providers or facilities, and any recommendations
25 for improved services for behavioral health consumers.

26 NEW SECTION. **Sec. 5.** (1) A certified behavioral health consumer
27 advocate shall:

28 (a) Identify, investigate, and resolve complaints made by, or on
29 behalf of, patients, residents, and clients of behavioral health
30 providers or facilities relating to administrative action, inaction,
31 or decisions that may adversely affect the health, safety, welfare,
32 and rights of these individuals;

33 (b) Assist and advocate on behalf of patients, residents, and
34 clients of behavioral health providers or facilities before
35 government agencies and seek administrative, legal, and other
36 remedies on their behalf, if appropriate;

37 (c) Inform patients, residents, and clients or their
38 representatives about applicable patient and resident rights, and
39 provide information, as appropriate, to patients, residents, clients,

1 family members, guardians, resident representatives, and others
2 regarding the rights of patients and residents;

3 (d) Make recommendations through the office and the contracting
4 advocacy organization for improvements to the quality of services
5 provided to patients, residents, and clients of behavioral health
6 providers or facilities; and

7 (e) With the consent of the patient, resident, or client, involve
8 family members, friends, or other designated individuals in the
9 process of resolving complaints.

10 (2) Nothing in this section shall be construed to grant a
11 certified behavioral health consumer advocate:

12 (a) Statutory or regulatory licensing or sanctioning authority;
13 or

14 (b) Binding adjudicative authority.

15 NEW SECTION. **Sec. 6.** (1) For state hospitals as defined in RCW
16 72.23.010, the state office of behavioral health consumer advocacy
17 shall work with the department of social and health services to:

18 (a) Establish specialized training for behavioral health consumer
19 advocates to work with forensic and criminal justice involved
20 populations at the state hospitals;

21 (b) Create procedures and protocols that ensure that behavioral
22 health consumer advocates have access to all state hospital patients
23 and their families or guardians as needed to perform their duties,
24 including persons who are awaiting admission to the state hospitals
25 while in jail;

26 (c) Establish guidelines for how the state office of behavioral
27 health consumer advocacy will work and collaborate with existing
28 state employees who serve in an ombuds or advocate role for the state
29 hospitals and ensure all legal requirements for these personnel are
30 maintained; and

31 (d) Develop a direct reporting structure to the governor's office
32 about any systemic issues that are discovered within the course of
33 the advocates' duties within the state hospitals.

34 (2) The state office of behavioral health consumer advocacy shall
35 complete this work in collaboration with the department of social and
36 health services by July 1, 2023, and prior to the deployment of
37 behavioral health consumer advocates within the state hospitals.

38 (3) The state office of behavioral health consumer advocacy shall
39 make strong efforts to encourage individuals with lived experience

1 specific to the state hospitals to undergo training to fulfill
2 behavioral health consumer advocate positions at the state hospitals.

3 NEW SECTION. **Sec. 7.** (1) The certified behavioral health
4 consumer advocates shall have appropriate access to behavioral health
5 providers or facilities to effectively carry out the provisions of
6 this chapter, with provisions made for the privacy of patients,
7 residents, and clients, according to the rules, policies, and
8 procedures developed under section 3 of this act.

9 (2) Nothing in this chapter restricts, limits, or increases any
10 existing right of any organizations or individuals not described in
11 subsection (1) of this section to enter or provide assistance to
12 patients, residents, and clients of behavioral health providers or
13 facilities.

14 (3) Nothing in this chapter restricts any right or privilege of a
15 patient, resident, or client of a behavioral health provider or
16 facility to receive visitors of their choice.

17 NEW SECTION. **Sec. 8.** (1) Every behavioral health provider or
18 facility shall post in a conspicuous location a notice providing the
19 toll-free phone number and website of the contracting advocacy
20 organization, as well as the name, address, and phone number of the
21 office of the appropriate local behavioral health consumer advocate
22 and a brief description of the services provided by the contracting
23 advocacy organization. The form of the notice must be approved by the
24 office. This information must also be distributed to the patients,
25 residents, and clients of behavioral health providers or facilities,
26 upon application for behavioral health services and upon admission to
27 a behavioral health provider or facility. The information shall also
28 be provided to the family members and legal guardians of the
29 patients, residents, or clients of a behavioral health provider or
30 facility, as allowed by state and federal privacy laws.

31 (2) Every behavioral health provider or facility must provide
32 access to a free telephone for the express purpose of contacting the
33 contracting advocacy organization.

34 NEW SECTION. **Sec. 9.** The contracting advocacy organization
35 shall develop and submit, for approval by the office, a process to
36 train and certify all behavioral health consumer advocates, whether
37 paid or volunteer, authorized by this chapter as follows:

1 (1) Certified behavioral health consumer advocates must have
2 training or experience in the following areas:

3 (a) Behavioral health and other related social services programs;

4 (b) The legal system, including differences in state or federal
5 law between voluntary and involuntary patients, residents, or
6 clients;

7 (c) Advocacy and supporting self-advocacy;

8 (d) Dispute or problem resolution techniques, including
9 investigation, mediation, and negotiation; and

10 (e) All applicable patient, resident, and client rights
11 established by either state or federal law.

12 (2) A certified behavioral health consumer advocate may not have
13 been employed by any behavioral health provider or facility within
14 the previous twelve months, except as a certified peer specialist or
15 where prior to the effective date of this section the person has been
16 employed by a regional behavioral health consumer advocate.

17 (3) No certified behavioral health consumer advocate or any
18 member of a certified behavioral health consumer advocate's family
19 may have, or have had, within the previous twelve months, any
20 significant ownership or financial interest in the provision of
21 behavioral health services.

22 NEW SECTION. **Sec. 10.** (1) The contracting advocacy organization
23 shall develop and submit for approval by the office referral
24 procedures for the organization and all certified behavioral health
25 consumer advocates to refer any complaint, in accordance with a
26 mutually established working agreement, to an appropriate state or
27 local government agency. The appropriate agency shall respond to any
28 complaint referred to it by a certified behavioral health consumer
29 advocate, in accordance with a mutually established working
30 agreement.

31 (2) State agencies shall review a complaint against a behavioral
32 health provider or facility which was referred to it by a certified
33 behavioral health consumer advocate, in accordance with a mutually
34 established working agreement, and shall forward to that certified
35 behavioral health consumer advocate a summary of the results of the
36 review or investigation and action proposed or taken.

37 (3) State agencies that regulate or contract with behavioral
38 health providers or facilities shall adopt necessary rules to

1 effectively work in coordination with the contracting advocacy
2 organization.

3 NEW SECTION. **Sec. 11.** (1) The contracting advocacy organization
4 shall develop and implement working agreements with the protection
5 and advocacy agency, the long-term care ombuds, the developmental
6 disabilities ombuds, the corrections ombuds, and the children and
7 family ombuds, and work in cooperation to assure efficient,
8 coordinated service.

9 (2) The contracting advocacy organization shall develop working
10 agreements with each managed care organization, behavioral health
11 administrative services organization, the state psychiatric
12 hospitals, all appropriate state and local agencies, and other such
13 entities as necessary to carry out their duties. Working agreements
14 must include:

15 (a) The roles of the contracting advocacy organization and the
16 agency or entity in complaint investigations, complaint referral
17 criteria, and a process for sharing information regarding complaint
18 review and investigation, as appropriate; and

19 (b) Processes and procedures to assure timely and seamless
20 information sharing among all interested parties and that the
21 contracting advocacy organization is responsive to all local
22 information requests.

23 NEW SECTION. **Sec. 12.** (1) No certified behavioral health
24 consumer advocate is liable for good faith performance of
25 responsibilities under this chapter.

26 (2) No discriminatory, disciplinary, or retaliatory action may be
27 taken against an employee or volunteer of a behavioral health
28 provider or facility, or a patient, resident, or client of a
29 behavioral health provider or facility, for any communication made,
30 or information given or disclosed, to aid the certified behavioral
31 health consumer advocate in carrying out duties and responsibilities
32 under this chapter, unless the same was done maliciously or without
33 good faith. This subsection is not intended to infringe on the rights
34 of the employer to supervise, discipline, or terminate an employee or
35 volunteer for other reasons, and shall serve as a defense to any
36 action in libel or slander.

37 (3) All communications by a certified behavioral health consumer
38 advocate, if reasonably related to the requirements of that

1 individual's responsibilities under this chapter and done in good
2 faith, are privileged and confidential, subject to the procedures
3 established by the office.

4 (4) A representative of the contracting advocacy organization is
5 exempt from being required to testify in court as to any confidential
6 matters except upon the express consent of the client, resident, or
7 patient that is subject to the court proceedings, or their
8 representatives, as applicable.

9 NEW SECTION. **Sec. 13.** It is the intent of the legislature that:

10 (1) Regional behavioral health ombuds programs existing prior to
11 this act be integrated into this new statewide program and the ombuds
12 from those programs be assessed and certified by the contracting
13 advocacy organization as behavioral health consumer advocates, and
14 for the state office of behavioral health consumer advocacy to
15 provide the regional behavioral health ombuds programs with any
16 additional training they may need to meet the requirements of section
17 5 of this act;

18 (2) There shall be a behavioral health consumer advocate office
19 within the boundaries of the region served by each behavioral health
20 administrative services organization;

21 (3) Federal medicaid requirements be complied with; and

22 (4) The department annually expend at least the amount expended
23 on regional behavioral health ombuds services prior to the effective
24 date of this section on the office and for the procurement of
25 services from the contracting advocacy organization under this
26 chapter.

27 NEW SECTION. **Sec. 14.** (1) All records and files of the office,
28 the contracting advocacy organization, and any certified behavioral
29 health consumer advocates related to any complaint or investigation
30 made pursuant to carrying out their duties and the identities of
31 complainants, witnesses, patients, residents, or clients and
32 information that could reasonably identify any of these individuals
33 shall remain confidential unless disclosure is authorized in writing
34 by the subject of the information, or the subject's guardian or legal
35 representative.

36 (2) No disclosures of records and files related to a complaint or
37 investigation may be made to any organization or individual outside
38 the office or the contracting advocacy organization without the

1 written consent of any named witnesses, complainants, patients,
2 residents, or clients unless the disclosure is made without the
3 identity of any of these individuals and without information that
4 could reasonably identify any of these individuals unless such
5 disclosure is required in carrying out its duties under this chapter.

6 (3) Notwithstanding subsections (1) and (2) of this section,
7 disclosures of records and files may be made pursuant to a court
8 order.

9 (4) All disclosures must be compliant with state and federal
10 privacy laws applicable to the type of information that is sought for
11 disclosure.

12 **Sec. 15.** RCW 71.24.045 and 2019 c 325 s 1008 are each amended to
13 read as follows:

14 (1) The behavioral health administrative services organization
15 contracted with the authority pursuant to RCW 71.24.381 shall:

16 (a) Administer crisis services for the assigned regional service
17 area. Such services must include:

18 (i) A behavioral health crisis hotline for its assigned regional
19 service area;

20 (ii) Crisis response services twenty-four hours a day, seven days
21 a week, three hundred sixty-five days a year;

22 (iii) Services related to involuntary commitments under chapters
23 71.05 and 71.34 RCW;

24 (iv) Additional noncrisis behavioral health services, within
25 available resources, to individuals who meet certain criteria set by
26 the authority in its contracts with the behavioral health
27 administrative services organization. These services may include
28 services provided through federal grant funds, provisos, and general
29 fund state appropriations;

30 (v) Care coordination, diversion services, and discharge planning
31 for nonmedicaid individuals transitioning from state hospitals or
32 inpatient settings to reduce rehospitalization and utilization of
33 crisis services, as required by the authority in contract; and

34 (vi) Regional coordination, cross-system and cross-jurisdiction
35 coordination with tribal governments, and capacity building efforts,
36 such as supporting the behavioral health advisory board(~~(the~~
37 ~~behavioral health ombuds,~~)) and efforts to support access to services
38 or to improve the behavioral health system;

1 (b) Administer and provide for the availability of an adequate
2 network of evaluation and treatment services to ensure access to
3 treatment, investigation, transportation, court-related, and other
4 services provided as required under chapter 71.05 RCW;

5 (c) Coordinate services for individuals under RCW 71.05.365;

6 (d) Administer and provide for the availability of resource
7 management services, residential services, and community support
8 services as required under its contract with the authority;

9 (e) Contract with a sufficient number, as determined by the
10 authority, of licensed or certified providers for crisis services and
11 other behavioral health services required by the authority;

12 (f) Maintain adequate reserves or secure a bond as required by
13 its contract with the authority;

14 (g) Establish and maintain quality assurance processes;

15 (h) Meet established limitations on administrative costs for
16 agencies that contract with the behavioral health administrative
17 services organization; and

18 (i) Maintain patient tracking information as required by the
19 authority.

20 (2) The behavioral health administrative services organization
21 must collaborate with the authority and its contracted managed care
22 organizations to develop and implement strategies to coordinate care
23 with tribes and community behavioral health providers for individuals
24 with a history of frequent crisis system utilization.

25 (3) The behavioral health administrative services organization
26 shall:

27 (a) Assure that the special needs of minorities, older adults,
28 individuals with disabilities, children, and low-income persons are
29 met;

30 (b) Collaborate with local government entities to ensure that
31 policies do not result in an adverse shift of persons with mental
32 illness into state and local correctional facilities; and

33 (c) Work with the authority to expedite the enrollment or
34 reenrollment of eligible persons leaving state or local correctional
35 facilities and institutions for mental diseases.

36 **Sec. 16.** RCW 71.24.380 and 2019 c 325 s 1022 are each amended to
37 read as follows:

38 (1) The director shall purchase behavioral health services
39 primarily through managed care contracting, but may continue to

1 purchase behavioral health services directly from providers serving
2 medicaid clients who are not enrolled in a managed care organization.

3 (2) The director shall require that contracted managed care
4 organizations have a sufficient network of providers to provide
5 adequate access to behavioral health services for residents of the
6 regional service area that meet eligibility criteria for services,
7 and for maintenance of quality assurance processes. Contracts with
8 managed care organizations must comply with all federal medicaid and
9 state law requirements related to managed health care contracting,
10 including RCW 74.09.522.

11 (3) A managed care organization must contract with the
12 authority's selected behavioral health administrative services
13 organization for the assigned regional service area for the
14 administration of crisis services. The contract shall require the
15 managed care organization to reimburse the behavioral health
16 administrative services organization for behavioral health crisis
17 services delivered to individuals enrolled in the managed care
18 organization.

19 (4) A managed care organization must contract with the
20 contracting advocacy organization selected by the state office of
21 behavioral health consumer advocacy established in section 3 of this
22 act for the provision of behavioral health consumer advocacy services
23 delivered to individuals enrolled in the managed care organization.
24 The contract shall require the managed care organization to reimburse
25 the office of behavioral health consumer advocacy for behavioral
26 health consumer advocacy services delivered to individuals enrolled
27 in the managed care organization.

28 (5) A managed care organization must collaborate with the
29 authority and its contracted behavioral health administrative
30 services organization to develop and implement strategies to
31 coordinate care with tribes and community behavioral health providers
32 for individuals with a history of frequent crisis system utilization.

33 ((+5)) (6) A managed care organization must work closely with
34 designated crisis responders, behavioral health administrative
35 services organizations, and behavioral health providers to maximize
36 appropriate placement of persons into community services, ensuring
37 the client receives the least restrictive level of care appropriate
38 for their condition. Additionally, the managed care organization
39 shall work with the authority to expedite the enrollment or

1 reenrollment of eligible persons leaving state or local correctional
2 facilities and institutions for mental diseases.

3 ~~((6))~~ (7) As an incentive to county authorities to become early
4 adopters of fully integrated purchasing of medical and behavioral
5 health services, the standards adopted by the authority shall provide
6 for an incentive payment to counties which elect to move to full
7 integration by January 1, 2016. Subject to federal approval, the
8 incentive payment shall be targeted at ten percent of savings
9 realized by the state within the regional service area in which the
10 fully integrated purchasing takes place. Savings shall be calculated
11 in alignment with the outcome and performance measures established in
12 RCW 71.24.435, 70.320.020, and 71.36.025, and incentive payments for
13 early adopter counties shall be made available for up to a six-year
14 period, or until full integration of medical and behavioral health
15 services is accomplished statewide, whichever comes sooner, according
16 to rules to be developed by the authority.

17 NEW SECTION. **Sec. 17.** RCW 71.24.350 (Behavioral health ombuds
18 office) and 2019 c 325 s 1020, 2018 c 201 s 4019, 2016 sp.s. c 29 s
19 523, 2014 c 225 s 41, 2013 c 23 s 189, & 2005 c 504 s 803 are each
20 repealed.

21 NEW SECTION. **Sec. 18.** Sections 1 through 14 of this act
22 constitute a new chapter in Title 71 RCW.

23 NEW SECTION. **Sec. 19.** Sections 15 through 17 of this act take
24 effect October 1, 2022.

25 NEW SECTION. **Sec. 20.** If specific funding for the purposes of
26 this act, referencing this act by bill or chapter number, is not
27 provided by June 30, 2021, in the omnibus appropriations act, this
28 act is null and void."

E2SHB 1086 - S COMM AMD
By Committee on Ways & Means

ADOPTED 04/07/2021

29 On page 1, line 2 of the title, after "advocacy;" strike the
30 remainder of the title and insert "amending RCW 71.24.045 and

1 71.24.380; adding a new chapter to Title 71 RCW; creating a new
2 section; repealing RCW 71.24.350; and providing an effective date."

EFFECT: Requires the Department of Commerce to encourage persons with lived experience of behavioral health conditions and family members of persons with behavioral health conditions to apply to fill the role of contracting advocacy organization within the state Office of Behavioral Health Consumer Advocacy. Requires the Office to provide any necessary training to regional behavioral health ombuds programs to meet the requirements to be certified as behavioral health consumer advocates.

Requires the Office to work with the Department of Social and Health Services to establish specialized training, procedures, protocols, and guidelines for behavioral health consumer advocates to work with forensic and criminal justice involved populations at the state hospitals and existing state employees who serve in an Ombuds or advocate role by July 1, 2023, and prior to deploying behavioral health consumer advocates within the state hospitals.

Provides that the state Office of Behavioral Health Consumer Advocacy must certify regional behavioral health consumer advocates by October 1, 2022, and adjusts the effective date of sections removing requirements for behavioral health administrative services organizations to provide regional behavioral health Ombuds services until October 1, 2022.

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